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DEGLADATION FOR UTUITY OR	Attorney Docket Num	ber 960296.98458		
DECLARATION FOR UTILITY OR DESIGN	First Named Inventor	Milo M.K. Martin		
PATENT APPLICATION	COMPLETE IF KNOWN			
(37 CFR 1.63)	Application Number			
Declaration Submitted with Initial Filing Declaration Submitted after Initial Filing (37 CFR 1.16 (e)) required)	Filing Date	October 18, 2001		
	Group Art Unit			
	Examiner Name			

	required)	Examine Ham	<u> </u>	
As a below named inventor, I he	ereby declare that:			***
My residence, mailing address, ar	nd citizenship are as sta	ted below next to my nan	ne.	
I believe I am the original, first and names are listed below) of the sul	d sole inventor (if only o	ne name is listed below) imed and for which a pate	or an original, firs ent is sought on t	t and joint inventor (if plural the invention entitled:
BANDWIDTH	H-ADAPTIVE, HYBI	RID, CACHE-COHE	RENCE PRO	TOCOL
	(Title of	the Invention)		
the specification of which	(7180-071	ne mvenuony		
is attached hereto				
OR was filed on (MM/DD/YYYY)		as United St	tates Application	Number or PCT International
Application Number	and was	amended on (MM/DD/YY	YY)	(if applicable).
I hereby state that I have reviewed amended by any amendment spe	d and understand the co	intents of the above ident e.	tified specification	n, including the claims, as
I acknowledge the duty to disclose in-part applications, material inform PCT international filing date of the	mation which became av continuation-in-part app	vailable between the filing olication.	g date of the prior	application and the national or
I hereby claim foreign priority ben or plant breeder's rights certificat than the United States of Americ patent, inventor's or plant breede application on which priority is clai	a, listed below and have r's rights certificate(s), o	ve also identified below.	by checking the	hox any foreign application for
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
Additional foreign application	numbers are listed on a	supplemental priority da	ta sheet PTO/SB	/02B attached hereto:
		ID4 - 6 07		

[Page 1 of 2]

Burden Hour Statement This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time, you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

Customer Number or Bar Code Labe Direct all correspondence to: OR Correspondence address below Name Address Address City State ZIP Country Telephone Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor NAME OF SOLE OR FIRST INVENTOR: Given Name Family Name Martin Milo M.K. (first and middle [if any]) or Surname inventor's Signature Country U.S. Citizenship U.S. WI Madison Residence: City 1212 Vilas Avenue, #1 **Mailing Address Mailing Address** city Madison ZIP 53715 Country U.S. WI State A petition has been filed for this unsigned inventor NAME OF SECOND INVENTOR: Family Name Sorin Given Name Daniel J. (first and middle [if any]) or Surname Inventor's Signature Date Madison W١ U.S. U.S. Residence: City 1015 Grant Street, #3 Mailing Address Mailing Address City Madison ZIP 53711 U.S. W١ Country Additional inventors are being named on the One supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Half days

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PTO/SB/02A (11-00)
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 3

1						
ne of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor				s unsigned inventor		
		Family Name	or Su	rname		
Given Name (first and middle [if any]) Mark D. Family Name or Surname Hill						
				Date		
State WI	c	U.S. country	С	U.S. itizenship		
ie						
State WI		ZIP 53705-3970 C	ountry	try U.S.		
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor						
)	Family Name or Surname					
	V	Wood				
				Date		
State WI		Country U.S.		Citizenship U.S.		
State WI		ZIP 53705 Country U		U.S.		
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) Family Nam		Name o	e or Surname			
				Date		
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